



Children's Behavioral Health Initiative

**New MassHealth Behavioral Health Services
Collaborating to Serve the Whole Child**





MassHealth: Our State's Medicaid Program

MassHealth provides comprehensive health insurance—or help in paying for private health insurance—to more than one million Massachusetts children, families, seniors, and people with disabilities.

New Behavioral Health Services for MassHealth-Enrolled Students Under 21

What is a “Behavioral Health” service?
This term is used by insurers, such as Medicaid, to refer to services to diagnose and treat **mental health** and **substance abuse** conditions.

New Behavioral Health Services for MassHealth-Enrolled Students Under 21

1. Universal BH Screening in Primary Care
2. Improved and Standardized BH Clinical Assessment Process
3. Improved Communication and Outreach to MassHealth Members
4. New Home and Community Based BH Services
5. Intensive Care Coordination Service

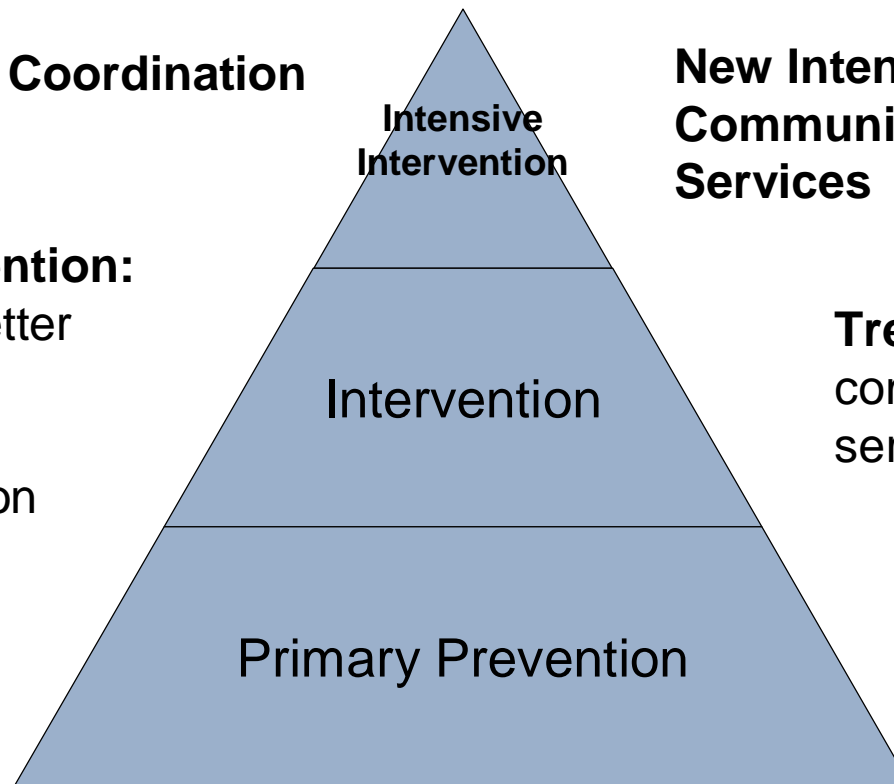
Behavioral Health Services for MassHealth-Enrolled Students

Intensive Care Coordination

New Intensive Home and Community-Based Services

Early Intervention:
screening, better
assessment,
outreach and
communication

Treatment: Flexible,
community-based
services



MassHealth and Schools: Collaborating to Serve the Whole Child

- Significant new resources for MassHealth-enrolled students and families
- Intensive Care Coordination for MassHealth-enrolled youth with complex needs
- School staff have critical roles:
 - Identifying likely behavioral health needs
 - Communicating skillfully with parents/guardians
 - Informing parents/guardians of BH resources

Behavioral Health Services for MassHealth-Enrolled Students

- What are the new services?
- Who is “eligible” for these services?
- How do families/guardians access the services?



Current MassHealth BH Services:

- **Outpatient therapy:** individual, group or family therapy; provided in an office, a home, school or other location
- **Structured Outpatient Addiction Program (SOAP):** short-term, intensive, structured day or evening substance abuse service
- **Partial Hospitalization Program:** nonresidential treatment program providing diagnostic and treatment services at the same level of intensity as inpatient care
- **Hospitalization**

Intensive Care Coordination –

June 30, 2009

What is Wraparound?



- “High-fidelity Wraparound” as described by the National Wraparound Initiative (e.g. 10 Wraparound Principles)
- A structured, ongoing team-based process for developing and implementing individualized Care Plans for children and youth with complex needs
- Process is facilitated by a Care Coordinator, a MA or BA-level MH clinician
- Strong emphasis on child and family strengths and on listening to voice of family and youth
- Process must be culturally informed to be effective
- A powerful approach to engaging families, and to making gains that can be sustained in the long run

Family Support and Training – “Family Partners”: June 30, 2009

- Family Partners have been caregivers of a child with mental health or other special needs and has received Family Partner training
- Supports family, youth participation in the wraparound process
- Supports caregiver in parenting the child w/ serious emotional disturbance – provides education, coaching, support and training
- In home and community settings



In-Home Therapy Services: Nov. 1, 2009

- In-home, intensive, family-based treatment
- Goals: treat child's mental health needs & promote healthy functioning of child in family
- Provided by a team: MA-level therapist and trained paraprofessional
- Delivered by a network of community-based providers

In-Home Behavioral Services: Oct.1, 2009

- Behavior Management Therapy (MA or PhD)
- Behavior Management Monitoring (BA)
- Specialized service for children with persistent problem behaviors, who don't benefit as much from talk-based therapies
- Addresses goals identified in a treatment plan written by an outpatient provider, In-Home Therapy provider or ICC provider. In other words, the child must also have either an outpatient provider, In-Home Therapy provider or ICC.
- In any setting where the child is naturally located, including home, school, childcare centers, respite settings
- Delivered by a network of community-based providers

New MassHealth Services: Therapeutic Mentoring – Oct. 1, 2009



- Structured one-on-one mentoring relationship between therapeutic mentor and child or youth
- Addresses daily living, social & communication needs
- *Addresses social functioning goals identified in a treatment plan written by an outpatient provider, In-Home Therapy provider or ICC provider.*
- In home, school or social settings
- Delivered by a network of community-based providers

Mobile Crisis Intervention: June 30, 2009

- Provided by local Emergency Services Providers
- Short-term (up to 72 hours), mobile, on-site, face-to-face crisis intervention
- Therapeutic response to a MassHealth-enrolled student's mental health crisis by trained crisis professionals
- In any setting where the child is naturally located, including home, school, childcare centers, respite settings
- Provides follow-up to other services

March 3, 2008





How to access Mobile Crisis Intervention:

- Mobile Crisis Intervention may only be called for children and youth up to age 21 who are enrolled in ANY MassHealth “coverage type” (except for “Limited”).
- School staff should follow their school’s policies for calling emergency services.
- Parents should be called before, or as soon as, Mobile Crisis Intervention is called.
- It is recommended that school staff anticipatorily seek signed consent to call MCI from parents/guardians of students likely to need crisis intervention.

At the Center: Care Coordination

Three
Service
“HUBS”:

1

Intensive Care Coordination (Wraparound)

- Clinical Assessment inc. CANS
- SED determination for eligibility
- Medical Necessity determination
- Care coordination

2

In-Home Therapy

- Clinical Assessment inc. CANS
- Medical necessity determination
- Care coordination available

3

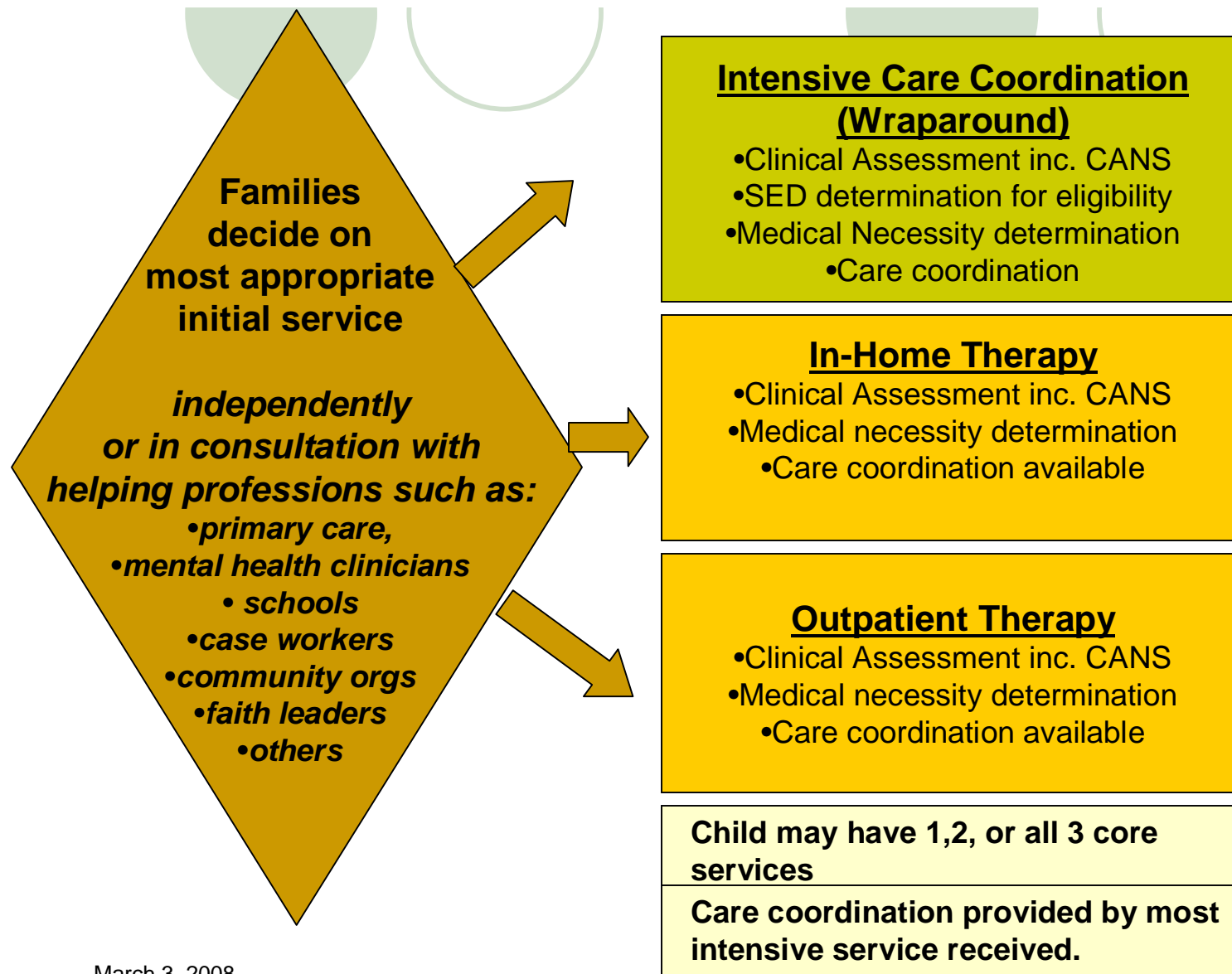
Outpatient Therapy

- Clinical Assessment inc. CANS
- Medical necessity determination
- Care coordination available

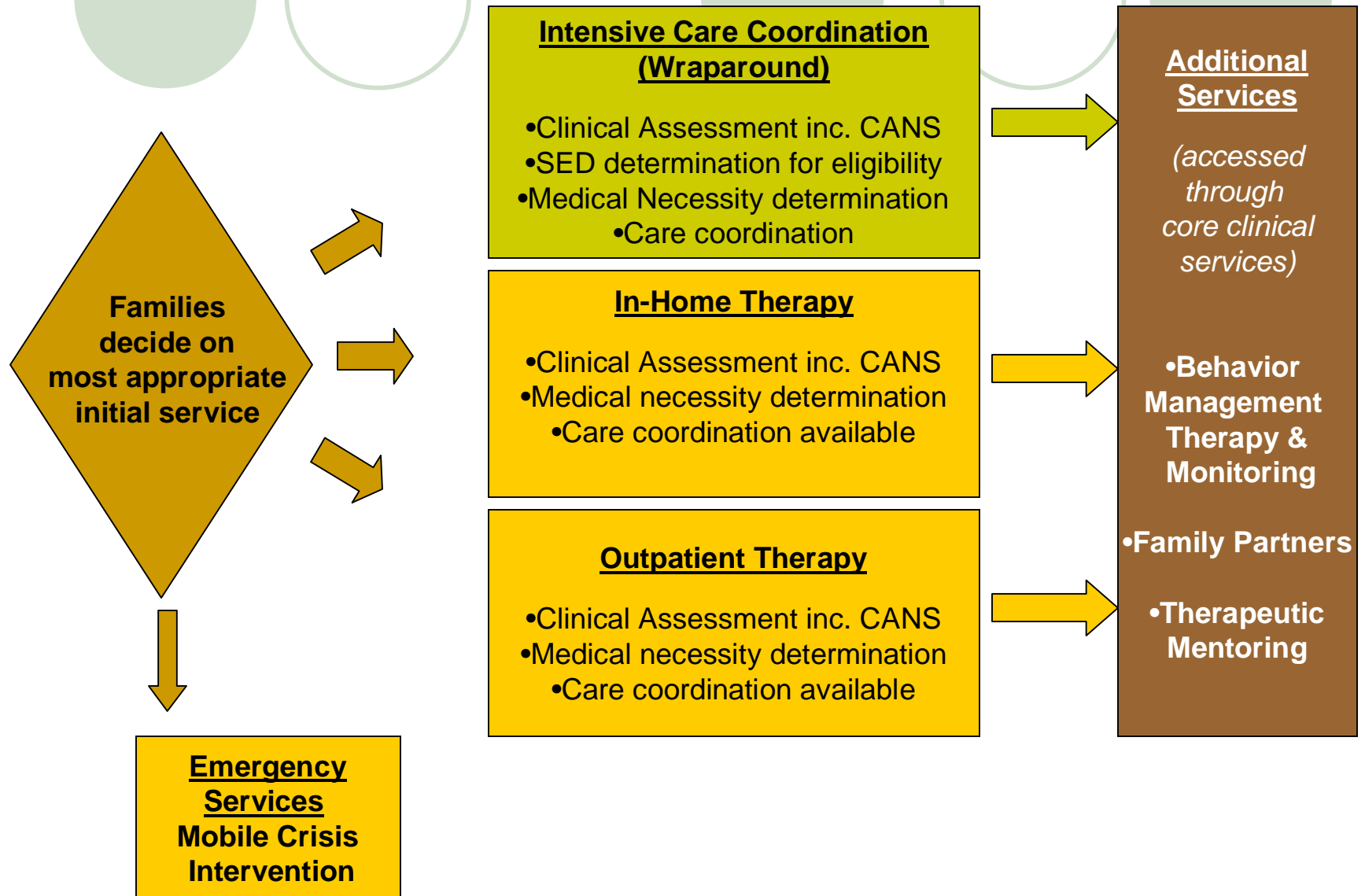
Child may have 1,2, or all 3 services

**Care coordination provided by most
intensive service received.**

Accessing Service Hubs:



Accessing Additional Services



Plan for delivering Intensive Care Coordination and Family Training and Support:

- 32 Community Service Agencies (CSAs) will provide Intensive Care Coordination
 - 29 geographically-based CSAs
 - 3 culturally and linguistically specialized CSAs
- Selected by MassHealth's health plans, who will all contract with same CSAs

Community Service Agencies:

- Deliver ICC and Family Training and Support services
- Convene and staff local System of Care Committees
- ARE NOT “lead agencies” for other remedy services



How does the school collaborate in ICC?

- The family chooses who will be on their child's team. If there are school issues, we encourage the family to invite someone from the school.
- If school is a strength for the child, that would also be a reason to invite someone from the school.
- The care planning process is separate from any IEP process. But, by maintaining good communication, each process can inform the other.
- Sometimes parents will ask the Care Coordinator or (more often) the Family Partner to attend IEP meetings with them. If these people attend, it is in the role of a support to the family rather than as an educational advocate. They can help the family understand and participate in the IEP process.
- The Care Planning Team is a natural ally in your pre-referral process to address needs prior to the IEP process.



How does the school collaborate in ICC? (2)

- Length of involvement with Wraparound varies depending on the needs of the child or youth, but in many cases will be in the range of 9 to 16 months.
- Meetings are typically held monthly, at locations and times convenient for the family, and for team members.
- Sometimes a meeting may be held at school, either early in the morning or after school is over, in order to enable school personnel to participate. Team members may also participate by phone.
- If you can't participate in a meeting, the Care Coordinator is responsible for communicating with you before and after the meeting to keep you informed.
- Good meetings are efficient and typically last an hour.



What's in it for me, my school, my student?

- Participating in a team has an associated cost: it takes time.
- So, given the pressures on school personnel, especially with many systems losing staff due to budget issues...
- Why, in reality, would I participate?



What's in it for me, my school, my student? (2)

- Children involved in ICC are likely to be children with complex needs that impact their school success.
- These are the 20% of kids that require 80% of your time. ICC helps you address the needs of your highest-need kids.
- ICC leverages the outside resources your students need to succeed in school.
- Your student and family have a Care Coordinator and a Family partner to support their participation in their plan. You don't need to be case manager any more. But you have a seat on the team.
- If the student disappears (into hospital, distant foster placement, or DYS), you know what's up. And you are kept informed of the discharge plan.



What's in it for me, my school, my student? (3)

- You have a crisis / safety plan that the family, therapist, and involved state agencies support. When a crisis occurs, you are not alone.
- In April / May, you are not alone in thinking about the structure your student needs for the summer. You have a team that will stay with the student while school is out.
- Your student has more than a therapist: she or he has a team that will persist over the long term to support the student's plan for success.
- You are less isolated in working with your high-risk student; you work with a community team.
- If the parent did not see you as an ally in the past, now there is a team framework to help them work with you in a positive way.



Who is eligible for these new services?

- Students enrolled in MassHealth Standard or CommonHealth (generally over 85% of all youth on MassHealth)
- With a “Medical Need” for the service. (There are “Medical Necessity Criteria” for each service, used by the provider of the service to determine medical necessity. These decisions are reviewed by the MassHealth Health Plans)

Who is eligible for these new services?(2)

- Children and youth under age 21 with a medical need for the service enrolled in other MassHealth “coverage types” such as Family Assistance, Basic or Essential MAY be able to access ***In-Home Therapy*** and ***Mobile Crisis Intervention***. Parents/guardians should call MassHealth Customer Service for assistance.
- These youth are **NOT** eligible to receive In-Home Behavioral Services, ICC, Therapeutic Mentoring or Family Support and Training

What if a Parent doesn't know what type of MassHealth they have?

- Parents can call their health plan (the name will be on the card they use when going to the doctor)
- They can call MassHealth Customer Service at 1-800-841-2900 (TTY: 1-800-497-4648)
- Because of privacy laws, school staff cannot make this call, but staff can support parents in making the call.

How school staff can help families access MassHealth:

- Families can get information about applying for MassHealth at www.Mass.gov/masshealth or by calling the MassHealth Enrollment Center at 1-888-665-9993 (TTY: 1-888-665-9997)
- Families will need to fill out and mail in a “Medical Benefit Request” (“MBR”) along with proof of income.

How school staff can help families access MassHealth CommonHealth:

- CommonHealth is MassHealth's coverage for children and adults with disabilities.
- THERE IS NO INCOME LIMIT for CommonHealth; there is a sliding scale premium, based on family income.
- If a child's condition meets the definition of "serious emotional disturbance" or "emotional disturbance", he or she may be eligible for "CommonHealth".
- Parents/guardians can either ask the MassHealth Enrollment Center to send them the "Disability Supplement" to the Medical Benefit Request form, or download both forms from the MassHealth website.

How school staff can help families access MassHealth behavioral health services:

Primary Care

Sometimes parents may feel more comfortable talking first with someone they already know....their child's primary care doctor or nurse can be a good place to start.

How school staff can help families access MassHealth behavioral health services, cont.:

For children and youth who are not currently using any behavioral health service:

- Parents/guardians can call providers directly – they do not need a referral from a primary care clinician, or anyone else.
- Parents/guardians can ask their child's primary care doctor or nurse for help finding a therapist.
- Parents/guardians can call the MassHealth Health Plan's Customer Service lines (numbers listed below). EVERYDAY they help people find services.

How school staff can help families access MassHealth behavioral health services, cont.:

For children and youth already using behavioral health services:

- Parents/guardians should talk to their child's therapist or other provider about their concerns and about what other services might be necessary.
- Parents/guardians can call their child's MassHealth Health Plan's Customer Service Center for help finding the right service for their child.
- Parents/guardians can learn more about the new MassHealth Behavioral Health services, and the providers of these services, by reading their child's MassHealth Health Plan Member Handbook.
- Parents/guardians can contact providers directly.

How school staff can help families access MassHealth behavioral health services, cont.:

School staff CAN call provider agencies
directly on behalf of students, WITH A
PARENT'S or GUARDIAN'S
PERMISSION

MassHealth's Health Plans:

- Boston Medical Center HealthNet Plan
Member Services: 1-888-566-0010 English
1-888-566-0012 Spanish
TTY: 1-800-421-1220

Member Behavioral Health Services (24 hours, seven days a week):
1-888-217-3501
- Fallon Community Health Plan
1-800-868-5200
TTY: 1-877-608-7677
- Massachusetts Behavioral Health Partnership
1-800-495-0086
TTY: 617-790-4130
- MassHealth Customer Service
1-800-841-2900
TTY: 1-800-497-4648
- Neighborhood Health Plan
1-800-462-5449
TTY: 1-800-655-1761
- Network Health
1-888-257-1985
TTY: 888-391-5535

Including CBHI related work in School Based Medicaid Administrative Claims:

Existing SBM Administrative Activity:

- Performing activities that inform eligible or potentially eligible individuals about MassHealth and how to access it.
- Assisting individuals in becoming eligible for MassHealth
- Performing activities associated with the development of strategies to improve the coordination and delivery of MassHealth-covered services to school-age children
- Making referrals for, coordinating and/or monitoring the delivery of MassHealth-covered services

CBHI Related Activity:

- Telling parents about CBHI services; Telling parents about how to apply to MassHealth
- Helping parents fill out an “MBR”
- Attending Systems of Care Committee meetings
- Participating in an ICC meeting

Ensuring CBHI Related Activities are Included in SBM Administrative Claim:

- Include staff who are likely to perform CBHI related activities in Random Moment Time Study (RMTS) quarterly participant list
- Include cost data for these staff in the SBM Quarterly Administrative Activity Claim

Resources:



- CBHI website (service descriptions, Medical Necessity Criteria, implementation updates and more):
www.mass.gov/masshealth/childbehavioralhealth
- MassHealth website: www.mass.gov/masshealth
- MBHP website (for lists of ESP providers, CSAs, and providers of other new MassHealth services under CBHI): <http://www.masspartnership.com/>
- National Wraparound Initiative website:
www.rtc.pdx.edu/nwi